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PTO/SB/05 (03-01)

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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br><small>(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))</small> | <b>Attorney Docket No.</b> 2269-5659US (02-1364.00/US)                                   |  |
|  | <b>First Inventor</b> Rodney L. Kirstine   |  |
|  | <b>Title</b> METHOD AND APPARATUS FOR MEASUREMENT OF THICKNESS AND WARPAGE OF SUBSTRATES |  |
|  | <b>Express Mail Label No.</b> EV326921897US  |  |

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| <b>APPLICATION ELEMENTS</b><br><small>See MPEP chapter 600 concerning utility patent application contents.</small><br><br>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><small>(Submit an original and a duplicate for fee processing)</small><br>2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.<br>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <span style="border: 1px solid black; padding: 0 5px;">23</span>]</span><br><small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the invention</li><li>- Brief Summary of the invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <span style="border: 1px solid black; padding: 0 5px;">6</span>]</span><br>5. Oath or Declaration <span style="float: right;">[Total Pages <span style="border: 1px solid black; padding: 0 5px;">3</span>]</span> <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d))<br/><small>(for a continuation/divisional with Box 18 completed)</small></li><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/><small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li></ul> 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | <b>ADDRESS TO:</b> <small>Mail Stop Patent Application<br/>Commissioner for Patents<br/>P.O. Box 1450<br/>Alexandria, VA 22313-1450</small><br><br>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li><li>b. Specification Sequence Listing on:<ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input type="checkbox"/> paper</li></ul></li><li>c. <input type="checkbox"/> Statements verifying identity of above copies</li></ul><br><b>ACCOMPANYING APPLICATIONS PARTS</b><br>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input checked="" type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney<br><small>(when there is an assignee)</small><br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><small>(Should be specifically itemized)</small><br>15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br><small>(if foreign priority is claimed)</small><br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input checked="" type="checkbox"/> Other: <u>Transmittal of Replacement Formal Drawings (1 page; Replacement Sheets (6 pages))</u> |
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18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:


☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)


of prior application No: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

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| <b>19. CORRESPONDENCE ADDRESS</b>                                     |  |   |  |   |  |
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|-------------------|---|-----------------------------------|-------------------------|
| Name (Print/Type) | Joseph A. Walkowski   | Registration No. (Attorney/Agent) | 28,765                  |
| Signature         |  |                                   | Date<br>August 18, 2003 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

|   |                             |   |  |                    |                |             |                 |                      |                    |               |                |                  |                |                     |                             |
|---|-----------------------------|---|--|--------------------|----------------|-------------|-----------------|----------------------|--------------------|---------------|----------------|------------------|----------------|---------------------|-----------------------------|
| <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="font-size: small; margin: 5px 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> |                             | <p style="text-align: center; font-size: small;">Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>To be assigned</td> </tr> <tr> <td>Filing Date</td> <td>August 18, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Rodney L. Kirstine</td> </tr> <tr> <td>Examiner Name</td> <td>To be assigned</td> </tr> <tr> <td>Group / Art Unit</td> <td>To be assigned</td> </tr> <tr> <td>Attorney Docket No.</td> <td>2269-5659US (02-1364.00/US)</td> </tr> </table> |  | Application Number | To be assigned | Filing Date | August 18, 2003 | First Named Inventor | Rodney L. Kirstine | Examiner Name | To be assigned | Group / Art Unit | To be assigned | Attorney Docket No. | 2269-5659US (02-1364.00/US) |
| Application Number  | To be assigned              |   |  |                    |                |             |                 |                      |                    |               |                |                  |                |                     |                             |
| Filing Date   | August 18, 2003             |   |  |                    |                |             |                 |                      |                    |               |                |                  |                |                     |                             |
| First Named Inventor  | Rodney L. Kirstine          |   |  |                    |                |             |                 |                      |                    |               |                |                  |                |                     |                             |
| Examiner Name   | To be assigned              |   |  |                    |                |             |                 |                      |                    |               |                |                  |                |                     |                             |
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| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1222  |                             |   |  |                    |                |             |                 |                      |                    |               |                |                  |                |                     |                             |

| METHOD OF PAYMENT (check all that apply)  |          |              |          | FEE CALCULATION (continued)   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|---|----------|--------------|----------|---|----------|--------------|--|-----------------|----------|--------------|----------|-----------------|----------|----------|----------|----------|----------|--------------------|-----|------|-----|-------------------------------------|-----|-------------------|----|------|-----|--|-----|------------------|-----|------|-----|---------------------------|-----|--------------------|-------|------|-------|--|----|------------------------|------|--|------|--|--|--------------|--------|--------------|--------|---|----------|----------|----------|----------|----------|--|----|------|-----|------------------------|-----|---|----|------|-----|-----------------------------------|-----|--|-----|------|-------|---------------------------------------|-----|---|----|------|-------|--|-----|--|----|------|-----|--|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|--------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|----|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input type="checkbox"/> Deposit Account:   |          |              |          | <b>3. ADDITIONAL FEES</b>   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Deposit Account Number: 20-1469<br><br>Deposit Account Name: TraskBritt   |          |              |          | <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17 (q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40</td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> |          |              |  | Large Entity    |          | Small Entity |          | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051               | 130 | 2051 | 65  | Surcharge - late filing fee or oath |     | 1052              | 50 | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet |     | 1053             | 130 | 1053 | 130 | Non-English specification |     | 1812               | 2,520 | 1812 | 2,520 | For filing a request for reexamination |    | 1804                   | 920* | 1804   | 920* | Requesting publication of SIR prior to Examiner action |  | 1805         | 1,840* | 1805         | 1,840* | Requesting publication of SIR after Examiner action |          | 1251     | 110      | 2251     | 55       | Extension for reply within first month |    | 1252 | 410 | 2252                   | 205 | Extension for reply within second month |    | 1253 | 930 | 2253                              | 465 | Extension for reply within third month |     | 1254 | 1,450 | 2254                                  | 725 | Extension for reply within fourth month |    | 1255 | 1,970 | 2255   | 985 | Extension for reply within fifth month |    | 1401 | 320 | 2401   | 160 | Notice of Appeal |  | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal |  | 1403 | 280 | 2403 | 140 | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,300 | 2453 | 650 | Petition to revive - unintentional |  | 1501 | 1,300 | 2501 | 650 | Utility issue fee (or reissue) |  | 1502 | 470 | 2502 | 235 | Design issue fee |  | 1503 | 630 | 2503 | 315 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17 (q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40 | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
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| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051  | 130      | 2051         | 65       | Surcharge - late filing fee or oath   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052  | 50       | 2052         | 25       | Surcharge - late provisional filing fee or cover sheet  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053  | 130      | 1053         | 130      | Non-English specification   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812  | 2,520    | 1812         | 2,520    | For filing a request for reexamination  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804  | 920*     | 1804         | 920*     | Requesting publication of SIR prior to Examiner action  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805  | 1,840*   | 1805         | 1,840*   | Requesting publication of SIR after Examiner action   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251  | 110      | 2251         | 55       | Extension for reply within first month  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252  | 410      | 2252         | 205      | Extension for reply within second month   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253  | 930      | 2253         | 465      | Extension for reply within third month  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254  | 1,450    | 2254         | 725      | Extension for reply within fourth month   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255  | 1,970    | 2255         | 985      | Extension for reply within fifth month  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401  | 320      | 2401         | 160      | Notice of Appeal  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402  | 320      | 2402         | 160      | Filing a brief in support of an appeal  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403  | 280      | 2403         | 140      | Request for oral hearing  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451  | 1,510    | 1451         | 1,510    | Petition to institute a public use proceeding   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452  | 110      | 2452         | 55       | Petition to revive - unavoidable  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453  | 1,300    | 2453         | 650      | Petition to revive - unintentional  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501  | 1,300    | 2501         | 650      | Utility issue fee (or reissue)  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502  | 470      | 2502         | 235      | Design issue fee  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503  | 630      | 2503         | 315      | Plant issue fee   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460  | 130      | 1460         | 130      | Petitions to the Commissioner   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807  | 50       | 1807         | 50       | Processing fee under 37 CFR 1.17 (q)  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806  | 180      | 1806         | 180      | Submission of Information Disclosure Stmt   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021  | 40       | 8021         | 40       | Recording each patent assignment per property (times number of properties)  | 40       |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809  | 750      | 2809         | 375      | Filing a submission after final rejection (37 CFR § 1.129(a))   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810  | 750      | 2810         | 375      | For each additional invention to be examined (37 CFR § 1.129(b))  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801  | 750      | 2801         | 375      | Request for Continued Examination (RCE)   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802  | 900      | 1802         | 900      | Request for expedited examination of a design application   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b>  |          |              |          | <b>2. EXTRA CLAIM FEES</b>  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td>750</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> |          |              |          | Large Entity  |          | Small Entity |  | Fee Description | Fee Paid | Fee Code     | Fee (\$) | Fee Code        | Fee (\$) | 1001     | 750      | 2001     | 375      | Utility filing fee | 750 | 1002 | 330 | 2002                                | 165 | Design filing fee |    | 1003 | 520 | 2003   | 260 | Plant filing fee |     | 1004 | 750 | 2004                      | 375 | Reissue filing fee |       | 1005 | 160   | 2005                                   | 80 | Provisional filing fee |      | <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> |      |  |  | Large Entity |        | Small Entity |        | Fee Description                                     | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1202                                   | 18 | 2202 | 9   | Claims in excess of 20 |     | 1201                                    | 84 | 2201 | 42  | Independent claims in excess of 3 |     | 1203                                   | 280 | 2203 | 140   | Multiple dependent claim, if not paid |     | 1204                                    | 84 | 2204 | 42    | ** Reissue independent claims over original patent |     | 1205                                   | 18 | 2205 | 9   | ** Reissue claims in excess of 20 and over original patent |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description   | Fee Paid |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001  | 750      | 2001         | 375      | Utility filing fee  | 750      |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002  | 330      | 2002         | 165      | Design filing fee   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003  | 520      | 2003         | 260      | Plant filing fee  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004  | 750      | 2004         | 375      | Reissue filing fee  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005  | 160      | 2005         | 80       | Provisional filing fee  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description   | Fee Paid |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18       | 2202         | 9        | Claims in excess of 20  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 84       | 2201         | 42       | Independent claims in excess of 3   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 280      | 2203         | 140      | Multiple dependent claim, if not paid   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 84       | 2204         | 42       | ** Reissue independent claims over original patent  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18       | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (1)</b> (\$) 750  |          |              |          | <b>SUBTOTAL (2)</b> (\$) 432  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>2. EXTRA CLAIM FEES</b>  |          |              |          | <b>Other fee (specify)</b> _____  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims: 44 -20 ** = 24 X 18 = 432<br>Independent Claims: 3 -3 ** = 0 X 84 = 0<br>Multiple Dependent: X = 0  |          |              |          | <b>SUBTOTAL (3)</b> (\$) 40   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| **or number previously paid, if greater; For Reissues, see above  |          |              |          | *Reduced by Basic Filing Fee Paid   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |  |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |

| SUBMITTED BY      |                    |                                 |        | Complete (if applicable) |                 |
|-------------------|--------------------|---------------------------------|--------|--------------------------|-----------------|
| Name (Print/Type) | Josep A. Walkowski | Registration No. Attorney/Agent | 28,765 | Telephone                | 801-532-1922    |
| Signature         |                    |                                 |        | Date                     | August 18, 2003 |

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**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**In re Application of:**

Rodney L. Kirstine

**Serial No.:** Not Yet Assigned

**Filed:** August 18, 2003

**For:** METHOD AND APPARATUS FOR  
MEASUREMENT OF THICKNESS AND  
WARPAGE OF SUBSTRATES

**Confirmation No.:** Unknown

**Examiner:** Unknown

**Group Art Unit:** Unknown

**Attorney Docket No.:** 2269-5659US

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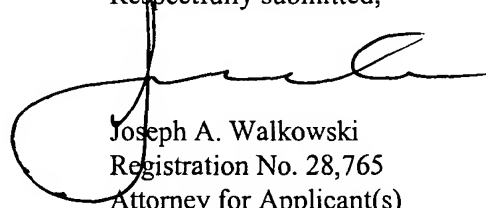
**TRANSMITTAL OF REPLACEMENT FORMAL DRAWINGS**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Attached please find the Replacement formal drawings for this application in substitution for the informal drawings as filed with the application.

Respectfully submitted,



Joseph A. Walkowski  
Registration No. 28,765  
Attorney for Applicant(s)  
TRASKBRITT  
P.O. Box 2550  
Salt Lake City, Utah 84110-2550  
Telephone: 801-532-1922

Date: August 18, 2003  
JAW/ljb  
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